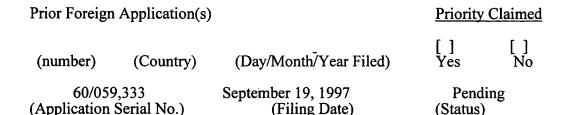
COMBINED INVENTOR DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Multiple Array Microfluidic Device Units						
the specification of	of which					
(check one	[] e) []	Is attached hereto. Was filed on and has b	een assign	ed Serial Nun	nber	
	[X]	Was filed on April 25, 2000 as ACBI.028.01US.	Attorney D	ocket No.		
		ewed and understand the contents laims, as amended by any amend				
this application as such information	s defined in under 37 Cl	sclose all information known to m Title 37, Code of Federal Regula FR § 1.56 which became available prior application and the filing of	tions, §1.5 e between	6 and, if applithe national o	icable, all	
application(s) for	patent or in n for patent	y benefits under Title 35, United ventor's certificate listed below a or inventor's certificate having a is claimed:	nd have al	so identified b	pelow any	
Prior Foreign Application(s)			Priority Claimed			
(number)	(Country)	(Day/Month/Year Filed)	[] Yes	[] No		
Prior Foreign Application(s)				Priority Claimed		
(number)	(Country)	(Day/Month/Year Filed)	[] Yes	[] No		



I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 USC §112 I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56, which became available between the filing date of the prior application and the national or PCT international filing date of this application:

09/153,814 (Application Serial No.)	September 15, 1998 (Filing Date)	Pending (Status)
(Application Serial No.)	(Filing Date)	(Status)
(Application Serial No.) * designating the U.S.	(Filing Date)	(Status)

I hereby appoint:

BARBARA RAE-VENTER, Ph.D., Reg. No. 32,750 BERTRAM I. ROWLAND, Ph.D., Reg. No. 20,015 JENNIFER WAHLSTEN, Ph.D., Reg. No. 46,226

as my attorneys or agents with full power of substitution and revocation to prosecute my aboveidentified application for Letters Patent and to transact all business in the Patent Office connected therewith.

Direct all telephone calls to Barbara Rae-Venter, Ph.D. at (650) 328-4400.

Address all correspondence to:

Bertram I. Rowland, Ph.D. Rae-Venter Law Group, P.C. P. O. Box 60039 Palo Alto, California 94306-0039

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or firs	t inventor:
Inventor's signature:	Torleif Ove Bjornson
Date:	
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Full name of second join	nt inventor, if any:
Inventor's signature:	
Date:	
Residence:	·
Citizenship:	
Post Office Address:	
Full name of third joint	inventor, if any:
Inventor's signature:	
Date:	
Residence:	
Citizenship:	
Post Office Address:	
Full name of fourth join	t inventor, if any:
Inventor's signature:	
Date:	
Residence:	
Citizenship:	
Post Office Address:	